



Wisconsin Department of Public Instruction
USDA COMMODITY DISTRIBUTION PROGRAM
COMPLAINT FORM
PI-6005 (Rev. 5-06)

Mail completed form to:

DEPARTMENT OF PUBLIC INSTRUCTION
ATTN: ANTONIO ANTE
SCHOOL NUTRITION TEAM
P.O. BOX 7841
MADISON, WI 53707-7841

INSTRUCTIONS:

1. Contact the distributor/manufacture to verify origin of product (commercial vs. commodity).
2. If product is a USDA commodity, report complaint promptly to state agency.
3. Complete two (2) copies. Retain one (1) copy for your files and within three (3) days mail one copy to address appearing on the left of this form.

GENERAL INFORMATION

1. School Food Authority Name	Agency Code	Date <i>Mo./Day/Yr.</i>
2. School Food Authority Address <i>Street, City, State, Zip</i>		
3. Building Where Complaint Originated	Food Service Manager	Telephone <i>Area/No.</i>
4. School Food Authority Storage Facility Address <i>(if different from above)</i>		
5. Contact Person	Title	Telephone <i>Area/No.</i>

COMMODITY COMPLAINT

6. Delivery Method <i>Check only one.</i> <input type="checkbox"/> State <input type="checkbox"/> Commercial	
7. <input type="checkbox"/> I have contacted the distributor and the product is a USDA commodity.	
8. Reason for Complaint <input type="checkbox"/> For Information Only <input type="checkbox"/> Vendor Response Requested <input type="checkbox"/> Seeking Restitution <input type="checkbox"/> Notify Vendor, No Response Necessary <input type="checkbox"/> Isolated Incident	
9. Date Problem was Discovered <i>Mo./Day/Yr.</i>	Date the Commodity was Received by Agency <i>Mo./Day/Yr.</i>
10. Commodity Code and Description	Pack Size Per Unit

The following information is found on the case, bale, can, or bag.

11. Vendor's Name	Lot Number	
	Box Number	Can Code
12. Amount Received	Amount Involved in Complaint	Amount Remaining
13. Give Detailed Description of Problem		

STATE DISTRIBUTING AGENCY USE ONLY

14. DPI Approval Initials/Date	D/O Number	Contract Number	N/D Number	Establishment Number
15. Warehouse Location	Vendor Ship Date		Date Received by Warehouse	

	COMMODITY DISTRIBUTION PROGRAM COMPLAINT FORM INSTRUCTIONS	
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Only complete the complaint form if the complaint is quality related. Quality concerns can include such things as a foreign object in a commodity, and the color, texture or palatability of a commodity. **Do Not Complete** this form if you received damaged product(s). Damaged product(s) is a warehouse/delivery issue and is not a USDA complaint issue.

If a foreign object is involved in the complaint, send only the foreign object. **Do Not** send perishable food involved in the complaint through the mail.

Prior to completing this complaint form, verify the origin of the product to ensure that it is a commodity product and not a commercially received product.

	INSTRUCTIONS	
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Row Number	Line Items
1.	Fill in the school food authority (SFA) name, agency code number, and the date that you are completing the complaint form.
2.	Fill in the mailing address of the SFA involved in the complaint.
3.	Fill in the building name of where the complaint originated, if different from SFA name. Also fill in food service manager name and phone number.
4.	Fill in address of where the complaint originated, if different from the SFA mailing address.
5.	Fill in contact name, title, and telephone number of person that discovered product complaint, if different than contact listed in row number 3.
6.	Place a check (✓) in the delivery method box that you are currently using for commodity deliveries State delivery versus Commercial distributor delivery.
7.	Place a check (✓) in the box to indicate you have verified with your distributor that the product is a commodity product.
8.	Place a check (✓) in the box(es) to indicate reason for complaint (for information only, seeking restitution, isolated incident, vendor response, notify vendor)
9.	Indicate the date that the problem was discovered and the original date that the SFA received the product.
10.	Indicate what commodity product is involved in the complaint. Indicate the commodity code, the commodity description and the pack size of the product.
11.	Fill in the product specific information contained on the product case (vendor name, lot number, box number, can code). Please provide as much detail as possible.
12.	Fill in the original amount of this product received, the amount involved in the complaint, and the amount of the product remaining in inventory.
13.	Provide a detailed description of the product complaint.
14.	Do not complete , for DPI use only.
15.	Do not complete , for DPI use only.